Clearly, this is a *very* generous reading of Brill et al. and uses the language of the instant application to over extend what is *actually* in Brill et al.

Then, it *is* recognized in the action that Brill et al. has absolutely nothing whatsoever to do with wound care. To remedy that, the action relies on *Solutions*™ to overcome this deficiency. Of course, to do so, the rejection must again use the instant application as a guide and relies on impermissible hindsight to conclude that the claims are obvious over the combination of Brill et al. and *Solutions*™.

Further, all the claims have now been limited to *mechanical* methods and devices. (It is noted that the rejection appears to make no distinction between the method claims and the device claims.)

Additionally, new claims 16 and 17 are limited to wound *prevention* protocols. This clearly is not addressed by the rejection which asserts that it would be obvious to combine Brill et al. with *Solutions*™ since Brill et al. relates to an injury and a wound is an injury.

Finally, applicants maintain that there is absolutely no reason or suggestion in Brill et al. or in *Solutions*™ to combine their teachings, absent the teachings of the instant application, despite the assertions in the rejection to the contrary. Accordingly, for all these reasons, applicant requests that this rejection be withdrawn.

In view of the foregoing, entry of this amendment, reconsideration of this application, and allowance of the application with claims 1, 3-8, 10 and 13-17 are respectfully solicited.

Respectfully submitted,

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Version

Version With Markings Showing Changes Made

1. (Amended) A method of identifying a wound care protocol for a given wound or wound prevention protocol appropriate for a given patient comprising:

classifying the wound or patient against a defined scale for a first wound factor, which is a defined wound assessment factor or defined wound risk assessment factor to obtain a wound classification;

B1

grading the wound or patient against defined scales for one or more second wound factors, which are wound assessment factors or wound risk assessment factors; and

operating a mechanical visual decision tree device to show a decision or visual decision tree corresponding to the wound classification or to a scale for a wound assessment factor, wherein the visual decision tree device identifies at least one component of a treatment protocol for the graded wound factors.

8. (Amended) A method of identifying a wound care protocol for a given wound or wound prevention protocol appropriate for a given patient comprising:

classifying the wound or patient against a defined scale for a first wound factor, which is a defined wound assessment factor or defined wound risk assessment factor to obtain a wound classification;

B2

grading the wound or patient against defined scales for one or more second wound factors, which are wound assessment factors or wound risk assessment factors;

operating a mechanical visual decision tree device to show a decision or [the] visual decision tree corresponding to the wound classification or to a scale for a wound assessment factor, wherein at least one visual decision tree dictates two or more distinct decisions based on the grade of one or more second wound factors, and wherein the visual decision tree device identifies at least one component of a treatment protocol for the graded wound factors; and

marking a pre-defined display of treatment protocols to identify the components of a treatment protocol identified by the method.

10. (Amended) A visual decision tree device for identifying a wound care protocol for a given wound or wound prevention protocol appropriate for a given patient comprising;

B3

B3 cont.

a mechanical [or electronic] device for identifying and displaying one of at least two decisions or visual decision trees based on one or more inputted wound factors according to a defined scale,

wherein the visual decision tree device identifies at least one component of a treatment protocol for the graded wound factors.